

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | DT | 12 | 12-17-95 |
| O.I.P.E. CLASSIFIER | | | 12/15 |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | 71471 | 1/4 |

INDEX OF CLAIMS

✓ Rejected
 u Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
|-------|---------|
| 1 | 3/15/02 |
| 2 | 8/17/02 |
| 3 | 4/9/03 |
| 4 | 10/1/03 |
| 5 | 6/10/04 |
| 6 | 12/2/04 |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here